

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
UTILITY PATENT APPLICATION TRANSMITTAL

FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER: Andr w J. Ri s t al.  
TITLE: MEDICAL LEAD ADAPTOR

21909 U.S. PRO  
10/620710  
07/16/03

CERTIFICATE UNDER 37 CFR §1.10: I hereby certify that this Utility Patent Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelope addressed to: Mail Stop Patent Application, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450, "EXPRESS No. EV 331 792 617 US, on this 16th day of July, 2003.

Sue McCoy  
Printed Name  
  
Signature

MAIL STOP PATENT APPLICATION  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

We are transmitting herewith the attached:

- X Patent Application Transmittal
- X Specification:  
Total pages: 18 (including claims and abstract: Spec. 11 sheets; Claims 6 sheets; Abstract 1
- X Drawings:  
Total sheets: 8  
 formal  informal
- Combined Declaration and Power of Attorney:  
 executed  
 copy from prior application  
 Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))  
 Incorporation by Reference - *The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.*
- X Accompanying application parts:  
 Notification of filing a  
 Assignment of the Invention to Medtronic, Inc.  
 Assignment cover sheet  
 Information Disclosure Statement  
 PTO Form 1449  
 Copies of IDS citations  
 Preliminary Amendment  
 A copy of the Petition or Conditional Petition for Extension of Time in the prior application.  
 Return Postcard

IF A CONTINUING APPLICATION:

- Continuation  Divisional  Continuation-in-part (CIP) of prior application  
No. 10/465,158, filed June 19, 2003.
- Amend the specification by inserting before the first line the sentence: --This application is a \_\_\_\_\_ of application Serial No. \_\_\_\_\_, filed \_\_\_\_\_, now allowed.--
- Cancel in this application original claims \_\_\_\_\_ of the prior application before calculating the filing fee.  
(At least the original independent claim must be retained for filing purposes.)
- The prior application is assigned of record to Medtronic, Inc.
- The Power of Attorney in the prior application is to: \_\_\_\_\_

- This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) \_\_\_\_\_, filed \_\_\_\_\_.
- Address all future correspondence to: Elisabeth L. Belden, Reg. No. 50,751  
Telephone: (763) 514-4083  
Facsimile: (763) 505-2530



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FEE CALCULATION	No. of Claims Filed	Claims Included in Base Fee	No. of Extra Claims	Rate	Fee
Total Claims	18	20 = 0	0	x 18	0
Independent Claims	4	3 = 1	1	x 84	84
Multiple Dependent Claims	0	0	0	+ 280	0
Basic Filing Fee					\$750.00
				TOTAL	834.00

- Charge Deposit Account No. 13-2546 in the amount of **\$874.00** for the filing fee and assignment recordation fee of \$40.00.
- The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A duplicate of this transmittal is enclosed.

Date

July 16, 2003

  
Elisabeth L. Belden, Reg. No. 50,751  
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